

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-875)						SERIAL NO. 10/58882		FILING DATE	
APPLICANT(S)									
CLAIMS									
		AS FILED		AFTER 1 st AMENDMENT		AFTER 2 nd AMENDMENT			
		IND.	DEP.	IND.	DEP.	IND.	DEP.		
1		✓		✓					
2			✓		✓				
3			✓		✓				
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TOTAL IND.	1	↓	1	↓		↓			
TOTAL DEP.	12	←	11	←		←			
TOTAL CLAIMS	13		12						
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TOTAL IND.		↓		↓		↓			
TOTAL DEP.		←		←		←			
TOTAL CLAIMS									

PTO - 1360 (REV. 11/04)

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